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THE TANA RIVER COUNTY COMMUNITY HEALTH SERVICES ACT, 2022

No. 3 of 2022

Date of Assent: 15th June, 2022

Date of Commencement: See Section 1

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**FIRST SCHEDULE— PROCEDURE FOR ESTABLISHMENT OF
COMMUNITY HEALTH UNITS**

**SECOND SCHEDULE—THE TANARIVER COMMUNITY
HEALTH UNITS**

THE TANA RIVER COUNTY COMMUNITY HEALTH SERVICES ACT, 2022

AN ACT of the County Assembly of Tana River to give effect to the provisions of Article 43 (1) (a) of the Constitution of Kenya and to provide for the establishment and delineation of Community Health Units to promote primary health care services within the county for effective, efficient and sustainable delivery of community-based health services and for connected purposes.

ENACTED by the County Assembly of Tana River, as follows—

PART I—PRELIMINARY

Short title

1. This Act may be cited as the Tana River County Community Health Services Act, 2022 and shall come into force upon publication in the *Kenya Gazette*.

Interpretation

2. In this Act unless the context otherwise requires—

“community” means the area for which a community health unit has been established pursuant to section 6 of this Act;

“community-based health services” means health-care services that can be provided to people in their communities and includes health education, health promotion, disease prevention and control, mental-health services, immunization services, sexual and reproductive health services, emergency health services, addiction services, hygiene and sanitation services, home-based care, rehabilitation services, palliative-care services, referral services and first aid and treatment for illness and injury in relation to primary health care;

“community health committee” means a community health committee established pursuant to section 9 of this Act;

“community health unit annual work plan” means a cost plan with set indicators and targets for community health services and the improvement of the health of the community;

“community health services personnel” includes the community health officer and community health assistant;

“community health unit” means community health units established under section 6 of this Act;

“community health volunteer” means a person selected by the community based on a criteria defined in section 23 of this Act and has

undertaken relevant basic training curriculum to offer health services at the community level and has been continually appraised by the community health services personnel;

“County” means Tana River County;

“County Executive Committee Member” means the county executive committee member responsible for matters relating to health;

“County health management team” means the county health management team established pursuant to section 18 of the Tana River County Health Services Act, 2022;

“community health services” means health care services that can be provided to people in their communities and includes health education, health promotion, disease prevention, public-health services, addiction services, emergency health services, mental-health services, home-care services, palliative care services, long-term care, rehabilitation services, treatment for illnesses and injury in relation to primary care and such other community health services as the County Executive Committee member may from time to time prescribe;

“household” means a group of people living together in one house;

“link facility” means the nearest health facility located within the area where the community health services personnel or community health volunteers offers services and acts as the community health unit referral centre;

“out of pocket expenses” are incidental expenses incurred directly in the course of duty but shall not include any loss of remuneration;

“performance target” means a minimum monthly achievement to be attained by a community health volunteer;

“stipend” means a monthly-predefined amount of money paid to community health volunteers after having satisfactorily met set performance target;

“Sub-county health management team” means the sub-county health management team established pursuant to section 20 of the Tana River County Health Services Act, 2022; and

“village” means a people living together in clusters of households.

Objects and purpose of the Act

3. The object of this Act is to—

- (a) give effect to the provisions of Article 43 and 176 of the Constitution as well as section 48 of the County Governments Act;
- (b) provide for creation of institutional framework for community health structures in order to enhance community access to basic health services;
- (c) provide for delineation and establishment of community health units to promote primary health care within the County so as to provide for effective delivery of quality community health services;
- (d) create the necessary institutional and coordination framework to encourage and facilitate voluntary provision of community health services;
- (e) establish necessary institutional and regulatory mechanism for appointment, training and retention of community health volunteers;
- (f) establish a for a framework for the financing of community health services; and
- (g) promote community participation and social accountability in the delivery of community health services.

PART II — COMMUNITY HEALTH SERVICES

Duties and responsibilities of the county government

4. (1) The County Government shall provide health care facilities and services in the County, and shall—

- (a) ensure the progressive realisation of the right to health of county residents at the community level as provided for under Article 43 of the Constitution;
- (b) cooperate with the National Government in the implementation of national policy and standards on community health services and oversee the adherence to national standards and guidelines in the delivery of community health services;
- (c) adopt programme based budgeting and commit a prescribed percentage of its health budget for implementation of community health services in the County;
- (d) mobilise resources from partners and receive grants, gifts, donations or endowments and make legitimate disbursements therefrom for the delivery of community health services;

- (e) in collaboration with the National Government, explore various health insurance options to optimise financing for community health services;
- (f) establish policies and mechanisms to ensure that households are educated and informed on matters of healthy living and practices and appropriate healthy behavior including basic information on sanitation, hygiene, and the prevention and treatment of communicable and non-communicable diseases;
- (g) promote the recruitment, training and participation of community health volunteers in the provision of community health services;
- (h) ensure that every household has access to a community health services personnel and a community health volunteer;
- (i) collaborate with such entities as it may consider necessary for the promotion and provision of community health services;
- (j) develop and maintain a community based health information system to inform the implementation of equitable community health services in all wards in the County; and
- (k) provide advisory services and guidance to persons in need of community health care information.

(2) Every person within a community health unit is responsible for ensuring that the best health practices are effected and shall also —

- (a) participate in community-organized health activities;
- (b) attend and participate in meetings that are aimed at educating the people on best health practices and for disseminating information or feedback to the people;
- (c) make effort to implement behavioural changes that are aimed at improving individual, households and community health;
- (d) collaborate and cooperate with community health volunteers in promoting health within the community and eliminating health risks through strategies set and implemented by the county community health committee;
- (e) provide relevant data and information that would enable the community health volunteers to collect data and information for the purpose of informing policy decisions at different levels of governance.

Guiding principles

5. A person shall, in the performance of their functions under this Act, be guided by the following principles in addition to the national values and principles set out under Article 10 and the objects of devolution specified under Article 174 of the Constitution—

- (a) inclusivity and equity in the provision of health services;
- (b) co-ordinated public participation in the formulation, implementation and monitoring of policies, strategies and plans aimed at ensuring the delivery of effective community health services;
- (c) empowerment and capacity building as a means of facilitating access to effective community health services;
- (d) transparency and accountability in the implementation of community health programmes and activities aimed at ensuring the realisation of the right to health;
- (e) access to information in a format and using technology that enables access by persons with disabilities;
- (f) availability and access to timely delivery of services and timely and reliable information that facilitates the delivery and uptake of community health services; and
- (g) monitoring and evaluation of the policies, strategies and programmes established to enable the realisation of the right to health and the suitability of interventions put in place to address any gaps in the delivery of community health services.

**PART III— ESTABLISHMENT AND ADMINISTRATION OF
COMMUNITY HEALTH UNITS****Establishment of the community health unit**

6. (1) There is established community health units, which shall be the frontline community health service delivery structure located within the county health system comprising the villages of the County.

(2) For the purposes of this Act, the villages per community health unit shall not be more than 15 and shall have a population of not more than 5,000 people based on the topography of the area.

Alteration of areas

7. (1) The County Executive Committee member in consultation with the sub-county health management team, shall alter the boundaries or population of a community health unit if need arises.

(2) The County Executive Committee member in consultation with the sub-county health management committee established pursuant to this Act, may by regulations, annex the whole or any part of a community health unit to another community health unit.

Administration of the community health unit

8. Each of the community health units shall be administered by a community health services personnel as appointed by the County Public Service Board.

Establishment Community health committees

9. (1) The County Executive Committee member shall by notice in the *Gazette*, appoint, for each community health unit, a community health committee comprising —

- (a) a co-opted member of the link health facility committee who shall be the chairperson;
- (b) 4 members democratically elected by the community members in a public baraza under the supervision of the Chief and the ward administrator representing the youth, persons living with disability, women group and other marginalized groups in the community;
- (c) a community health services personnel who shall act as the technical adviser and secretary; and
- (d) a representative selected from the community health volunteers for the unit who shall be the treasurer.

(2) Not more than two thirds of the members shall be of the same gender.

Qualifications for appointment

10. A person shall be eligible to be elected to serve in the committee if the person—

- (a) has attained at least form four level education or its equivalent;
- (b) is a resident in the relevant community health unit;
- (c) is not disqualified under any written law in Kenya from being appointed into a public office; and
- (d) meets such other requirements as the County Executive Committee member may, by Regulation, prescribe.

Removal of community health committee member

11. The County Executive Committee member may, where the sub-county health management team considers there is a just cause or incapacity, remove or suspend any member of a community health committee and may re-appoint, reinstate or replace that member, whether the member's term has expired or not.

(3) A member of the community health committee may be removed or cease to be a member on one of the following grounds—

- (a) failure to attend three consecutive meeting without justifiable reason;
- (b) voluntary resignation;
- (c) gross misconduct;
- (d) death;
- (e) insanity; and
- (f) incapacity or incompetence.

Functions of the community health committee

12. (1) A community health committee shall be responsible for—

- (a) fostering community development that encourages the public to actively participate in health planning and service delivery;
- (b) constructing a community health profile that identifies the deficiencies and strengths of the community with respect to factors that affect health, including income and social status, social support networks, education, employment, physical environments, inherited factors, personal health practices and coping skills, child development and health services in the community;
- (c) preparing and maintaining an inventory of community-based health services delivered in the community;
- (d) assessing community health needs and community-based health services in relation to those needs;
- (e) providing such other advice and assistance that the community health services personnel requests;
- (f) managing, or assist in the management of, community health grants on behalf of the Executive Committee member, or with the approval of the Executive Committee member;

- (g) develop a community health unit annual workplan for each fiscal year; and
- (h) performing such other functions as the County Executive Committee member may authorize pursuant to this Act.

(2) The County Executive Committee member shall provide a community health committee with administrative support services and technical health-planning support services.

Reorganization of community health committees

13. The County Executive Committee member may divide, amalgamate with another community health committee or reconstitute a community health committee established for the better implementation of this Act.

Reimbursements to members

14. Subject to the Act and any policy adopted by the County Executive Committee member in consultation with the County Executive Committee member in charge of Finance, the members of the committee may be reimbursed for reasonable out of pocket expenses necessarily incurred by them in the performance of their duties.

Public forums

15. The community health committee shall conduct at least four public forums in the community health unit in each year for the purpose of providing information on the operations and activities of the community health committee and seeking input from the public.

Sittings of the community health committee

16. (1) A community health committee shall hold their sittings at such places within the community health unit as shall be determined by the chairperson in consultation with other members of the committee.

(2) The sittings of the community health committee shall be open and easily accessible to the public unless owing to the nature of the matter and for the reasons to be recorded, it has become necessary to exclude the public.

(3) The meetings of the community health committee shall be chaired by the chairperson and in his or her absence, an adhoc chair selected from the members present.

(4) The quorum at the sittings of the community health committee shall be at least five members.

(5) community health committees shall, at the beginning of every quarter prepare schedules of their sittings specifying the time and the venues and publicize the same through notices, posters and any other media that shall be accessible to the public at least three days prior to the first sitting of each quarter.

(6) A community health committee, shall hold at least one sitting in every quarter but, unless for special reasons, not more than three sittings in a quarter.

(7) The decisions of a community health committee shall be by consensus and where a vote becomes necessary, by a simple majority.

(8) The proceedings of the community health committee shall be recorded in writing and may be electronically recorded where possible.

Exemption from personal liability

17. No member of a community health committee is personally liable for anything done or omitted to be done or for any neglect or default in the bona fide exercise or purported exercise in good faith of a power conferred upon that member of the community health committee by this Act.

Power to dissolve

18. Subject to the approval of the county executive committee member, the sub-county health management team may dissolve a community health committee if the sub-county health management team considers it appropriate.

Duty to develop plan

19. (1) A community health committee shall develop a community health unit annual work plan for each fiscal year and submit it to the link facility in charge who shall forward it to the County Executive Committee member for Planning and implementation of the components of the community health plan.

(2) The community health unit annual work plan shall include—

- (a) recommended priorities for the delivery of community health services;
- (b) a demonstration that the recommended priorities have been established through community consultation;
- (c) provisions identifying and making recommendations for the elimination of any unnecessary duplication of community health services;

- (d) a list of the initiatives and programmes recommended by the community health committee for the improvement of the community health services;
- (e) the estimated cost of implementing community health programmes and initiatives.

(3) For the purpose of assisting the community health committee to make recommendations pursuant to sub-section (19)(2), the county executive committee member shall make available to the community health committee such information that will assist the community health committee in assessing the financial feasibility of implementing the recommendations.

(4) The county executive committee member shall ensure that community health unit annual work plans are developed by community health committees and considered in the preparation of the budget for the health services.

PART IV—RECRUITMENT AND TRAINING OF COMMUNITY HEALTH VOLUNTEERS AND COMMUNITY HEALTH SERVICES PERSONNEL

Community health volunteer

20. (1) There shall be a community health volunteer or such number of community health volunteers in a community health unit as determined by the County Executive Committee member.

(2) a community health volunteer shall be appointed by the community health committee upon selection by members of the community residing within the community health unit in a public baraza convened by the Chief and Ward Administrator.

Obligations of the community health volunteer

21. Obligations of community health volunteers shall include but not limited to —

- (a) take reasonable care for their own health and safety;
- (b) take reasonable care that their conduct does not adversely affect the health and safety of others;
- (c) comply with any reasonable instruction that is given to them by the community health services personnel;
- (d) cooperate with any reasonable health policy or procedure in place;

Disciplinary action

22. Community health volunteers who do not comply with their obligations under this Act and the regulations created thereunder may be subjected to disciplinary action which may lead to dismissal.

Qualifications for appointment as a Community Health Volunteer

23. A person shall be eligible for appointment as a community health volunteer if the person—

- (a) is a Kenyan citizen of sound mind and above the age of eighteen years;
- (b) has been a resident of relevant community health unit for a period of not less than five years prior to selection;
- (c) is generally accepted by the local community as an honest and upright citizen;
- (d) is literate and understands the language of the predominant community and is fluent in English or Kiswahili.;
- (e) is not disqualified for appointment by the provisions of this Act or any other law;
- (f) undertakes in writing to provide volunteer community health services in accordance with this Act, regulations and any guidelines provided;
- (g) agrees to undergo relevant training for the purpose of equipping the person with the relevant knowledge and skills necessary for undertaking volunteer community health work; and
- (h) has not been convicted and imprisoned of any offence within the preceding five years.

Roles of the community health volunteer

24. A community health volunteer shall be answerable to the community health services personnel and shall have the following responsibilities—

- (a) promotion of healthy living practices and disease prevention;
- (b) treating of common ailments and minor injuries, as first aid, with the support and guidance of the community health services personnel;
- (c) referring health cases to the link health facilities;
- (d) promoting health care seeking behaviour and compliance with treatment and advice;

- (e) visiting homes to determine the situation and dialogue with household members to undertake the necessary action for community health improvement;
- (f) promoting appropriate home care for the sick with the support of the community health services personnel;
- (g) organizing, mobilizing and leading village health activities;
- (h) maintaining village registers and keep relevant records and submit reports to the community health services personnel;
- (i) participate in disease surveillance and offer primary response;
- (j) tracing defaulters to ensure compliance with health interventions including immunization, tuberculosis treatment, malaria control, antiretroviral, malnutrition and antenatal care;
- (k) perform any other functions assigned by the community health services personnel under this Act.

Training of community health volunteers

25. The County Executive Committee member shall make necessary arrangements for the training and certification of community health volunteers using the approved curriculum.

Right of entry to households

26. (1) A community health volunteer may enter any household and any area within their jurisdiction at an appropriate time.

(2) A community health volunteer shall notify immediately the head of the household upon arrival and shall present appropriate identification.

(3) Residents shall have the right to request, deny or terminate visits by a community health volunteer.

(4) In case of refusal of the right to entry, the community health volunteer shall liaise with the community health services personnel to help fulfil the purpose of the visit.

Remuneration of community health volunteers

27. (1) A community health volunteer shall be paid such stipend inclusive of National Health Insurance cover as shall be determined by the county executive committee member in consultation with the county executive committee member in charge of finance and compensation for out of pocket expenses.

(2) The remuneration in sub-section (1) shall be paid subject to the community health volunteer attainment of 80% performance target to be conducted by the community health personnel.

Tenure of office of community health volunteers

28. (1) Community health volunteers shall hold office for a period of time as shall be determined by regulations issued by the County Executive Committee member.

(2) Despite the generality of sub-section (1), a community health volunteer shall vacate office on the following grounds—

- (a) inefficiency or is in breach of the terms of his appointment; or
- (b) resigns from office in writing to the community health services personnel;
- (c) death; or
- (d) is unable to discharge his or her duties due to physical or mental impairment.

(3) A vacancy arising in the office of the community health volunteer shall be filled within a period of 30 days.

Community health services personnel

29. (1) The County Public Service Board shall in consultation with the Chief Officer recruit and determine the terms and conditions of community health services personnel for each of the community health units.

(2) The community health services personnel shall be responsible for the coordination of community health services within the community health unit established under this Act.

Qualifications for appointment as a community health services personnel

30. A person shall be appointed as a community health services personnel if the person meets such requirements as may be determined by the County Public Service Board.

Roles of the community health services personnel

31. The roles of a community health services personnel shall include—

- (a) providing technical support to community health volunteers;

- (b) facilitating the provision of quality services by community health volunteers and ensuring smooth referral mechanisms linking community to referral facilities;
- (c) overseeing the selection of community health volunteers;
- (d) participating in organizing and facilitating community health volunteers training;
- (e) monitoring the management of community health volunteers' kits;
- (f) supporting community health volunteers in assigning tasks and coaching them to ensure achievement of desired outputs and outcomes;
- (g) compiling reports generated by community health volunteers and forwarding them to the appropriate levels for utilisation.
- (h) promoting co-operative dialogue and planning;
- (i) following-up and monitoring actions emerging from dialogue and planning sessions to ensure implementation.

PART V—COUNTY HEALTH MANAGEMENT TEAM

Functions of the county health management team

32. (1) It shall be the duty of the county health management team to ensure a coordinated, efficient, effective and consultative approach in delivery of voluntary health services.

(2) To achieve the objectives set out under subsection (1), the county health management team shall—

- (a) formulate policies relating to the management of volunteer health services;
- (b) oversee the development of the community health annual work plans by respective community health units;
- (c) monitor, evaluate and review implementation of community health annual work plans;
- (d) mobilize resources for purposes of efficient management of volunteer health services;
- (e) advise the county executive committee member on matters of general community health policy; and
- (f) perform any other functions assigned to it under this Act.

Powers of the county health management team

33. The county health management team shall have all the necessary powers for the execution of its functions under this Act.

Meetings of the county health management team

34. The county health management team shall meet at least once every three months.

(2) Subject to the provision of this Part, the county health management team may regulate its own procedure.

PART VI—FINANCIAL PROVISIONS**Funds**

35. The funds for financing of the implementation of this act shall consist of—

- (a) such monies as shall be appropriated by the County Assembly for the health budget subject to a prescribed percentage catering for community health services;
- (b) such grants or transfers as may be received from any lawful source;
- (c) grants and donations received from development partners;
- (d) such other monies received from national government as conditional or non-conditional grants, for services rendered to clients in accordance with the established system.

PART VII — MISCELLANEOUS PROVISIONS**Falsifying records**

36. Any person who falsifies any data or information collected in the course of duty commits an offence and is liable on conviction to a fine not exceeding shillings fifty thousand or to imprisonment not exceeding three months or to both such fine and imprisonment.

Supervision and Management

37. The County Executive Committee member in consultation with the county health management team and sub-county health management teams are responsible for the general supervision and management of this Act.

Regulations

38. (1) The County Executive Committee member in consultation with the county health management team, make regulations for the better carrying out of the provisions of this Act.

(2) Without prejudice to the generality of subsection (1), Regulations under subsection (1) may provide for—

- (a) the development and promotion of community health services in the County;
- (b) the classification and composition of community health units;
- (c) additional qualifications for appointment as a community health committee member;
- (d) the percentage of the health budget that shall cater for community health services;
- (e) health insurance funding options for financing community health services;
- (f) remuneration and payment of stipends to community health volunteers;
- (g) reimbursements to be paid to community health committee members; and
- (h) period for holding office by community health volunteers.

Savings and transition

39. A person who immediately before the coming into force of this Act was a community health volunteer, community health committee member or community health services personnel shall continue to act as such until the expiry of the duration for which the person is engaged.

7. The County government is advised to support these and other efforts aimed at ensuring that all stakeholders understand community health approaches prior to planning and budgeting of community health services in each fiscal year.

SECOND SCHEDULE**THE TANA RIVER COMMUNITY HEALTH UNITS**

Sub County	No.	Name of Chu	Link Facility	Population (Hold Registers MoH 513/2022)
Tana North	1.	Cheweale	Cheweale Dispensary	3991
	2.	Wadesa	Cheweale Dispensary	9814
	3.	Bilbil	Bilbil Dispensary	4060
	4.	Nanighi	Nanighi Dispensary	3048
	5.	Dukanotu	Charidende Dispensary	5009
	6.	Meti	Meti Dispensary	5054
	7.	Bura	Bura Sub County Hospital	5000
	8.	Biskidera	Bura Sub County Hospital	4889
	9.	Sabukie	Sabukie Dispensary	1716
	10.	Boka	Boka Dispensary	3717
	11.	Wange	Bangal Dispensary	4980
	12.	Bangale	Bangale Dispensary	4855
	13.	Ziwani	Mororo Dispensary	3862
	14.	Mororo	Mororo Dispensary	4554
	15.	Sombo	Sombo Dispensary	1514
	16.	Sala	Sombo Dispensary	2904
	17.	Areri	Madogo Health Centre	1449
	18.	Madogo A	Madogo Health Centre	5732
	19.	Madogo B	Madogo Health Centre	14378
	20.	Maramtu	Madogo Health Centre	2772
	21.	Mulanjo	Mulanjo Dispensary	2593
	22.	Konoramadh a	Madogo Health Centre	4320
	23.	Walesorea	Walesorea Disp.	3332
	24.	Mbalambala	Mbalambala Disp.	2814
	25.	Kamagur	Kamagur Disp.	3125
	26.	Balneke	Bangali Disp.	4940
	27.	Buwa	Buwa Dispensary	3090
	28.	Vango	Madogo Health Centre	5267
	29.	Anole	Mororo Dispensary	972
	30.	Bawama	Darime Disp.	1387
	31.	Korati	Korati Disp.	815
	32.	Adama	Adama Dispensary	3600
Tana Delta	33.	Wema Chu	Wema Catholic Dispensary	5722
	34.	Garsen Cu	Garsen Health Centre	5060
	35.	Boraimani	Garsen Health Centre	2264

Sub County	No.	Name of Chu	Link Facility	Population (Hold Registers MoH 513/2022)
		Cu		
	36.	Maziwa Chu	Maziwa Dispensary	3433
	37.	Danisa Chu	Idsowe Dispensary	3050
	38.	Semikaro C.U.	Semikaro Dispensary	1767
	39.	Idsowe Cu	Idsowe Dispensary	3194
	40.	Chira Cu	Garsen H.Centre	4311
	41.	Dalu Chu	Dalu Women Dispensary	4737
	42.	Gatundu Cu	Kipini H/Centre	3357
	43.	Mandingo Chu	Mandingo Dispensary	5633
	44.	Tarasaa Chu	Tarasaa Catholic	6666
	45.	Oda Chu	Oda Dispensary	4460
	46.	Galili Chu	Galili Dispensary	4194
	47.	Mnazini Cu	Mnazini Dispensary	6482
	48.	Odole Cu	Odole Dispensary	3233
	49.	Kipao Cu	Kipao Dispensary	4548
	50.	Mikameni Cu	Mwina Dispensary	2829
	51.	Matangeni Cu	Kipini Health Centre	5040
	52.	Baomo Cu	Kitere Minhaj Dispensary	2433
	53.	Sera Cu	Sera Dispensary	3413
	54.	Benderani Cu	Mwina Dispensary	1511
	55.	Kipini Cu	Kipini Health Centre	7396
	56.	Kilelengwan i Cu	Kau Dispensary	9154
	57.	Ozi Cu	Ozi Dispensary	3001
	58.	Idsowe South Cu	Idsowe Dispensary	3733
	59.	Chamwanam uma	Semikao Dispensary	2715
	60.	Hamesa-Kajisteni	Garsen Health Centre	5560
	61.	Dumi	Idsowe Dispensary	3295
	62.	Kone Cu	Kone Dispensary	5660
	63.	Ngao	Ngao Hospital	5753
	64.	Katsangani Cu	Oda Dispensary	5420
	65.	Abaganda	Sera Dispensary	4357

Sub County	No.	Name of Chu	Link Facility	Population (Hold Registers MoH 513/2022)
	66.	Assa Cu	Assa Dispensary	3804
	67.	Hurara Cu	Oda Dispensary	8990
	68.	Bahati Cu	Mnazini Dispensary	2876
Tana River	69.	Masabubu	Rhoka Dispensary	3753
	70.	Makere	Makere	6435
	71.	Chewani	Chewani	2175
	72.	Zubaki	G.K Prison Dispensary	7374
	73.	Hola	Hola C.R Hospital	8500
	74.	Mikinduni	Lenda	4308
	75.	Pumwani	Pumwani Dispensary	4100
	76.	Kinakomba	Majengo Dispensary	6615
	77.	Jamhuri	Majengo Dispensary	3688
	78.	Gwano	Wenje Dispensary	3121
	79.	Hara	Wenje Dispensary	3080
	80.	Gururi/Kalkacha	Bura Nomadic Dispensary	3452
	81.	Haroresa	Haroresa	3816
	82.	Wayu	Wayu Boro Dispensary	3595
	83.	Waldena	Waldena	2408
	84.	Chifiri	Chifiri Dispensary	1992
	85.	Hakoka	Chifiri Dispensary	2065
	86.	Daba	Aic Daba Dispensary	3724
	87.	Titila	Aic Titila Dispensary	3888
	88.	Kiarakungu	Chewani Dispensary	4432
	89.	Milalulu	Makere Disp	3952
	90.	Wayu Duka	Wayu Duka Disp	2719
	91.	Bula Secondary	Gk Prison	2400
	92.	Kalalani	Waldena	5532
	93.	Gafuru	Pumwani	4008
	94.	Lenda	Lenda Disp.	2932